

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines. 12FE4M5  
Debbie Bacigalupi for Congress

ADDRESS (number and street) PO Box 657  
 Check if different than previously reported. (ACC) San Carlos CA 94070

2. **FEC IDENTIFICATION NUMBER** ▼ C C00516799 3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A) CITY ▲ STATE ▲ ZIP CODE ▲ STATE ▼ DISTRICT  
CA 14

## 4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
  
- Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

- Primary (12P)  General (12G)  Runoff (12R)
- Convention (12C)  Special (12S)

Election on M M / D D / Y Y Y Y in the State of  

(c) 30-Day **POST**-Election Report for the:

- General (30G)  Runoff (30R)  Special (30S)

Election on M M / D D / Y Y Y Y in the State of  

5. Covering Period M M / D D / Y Y Y Y 07 / 01 / 2012 through M M / D D / Y Y Y Y 09 / 30 / 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Nancy L Warren

Signature of Treasurer Nancy L Warren

*[Electronically Filed]*

Date

M M / D D / Y Y Y Y 10 / 15 / 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only									
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**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Debbie Bacigalupi for Congress**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	12804.00	22085.97
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	12804.00	22085.97
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	5481.10	12113.58
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	5481.10	12113.58
8. Cash on Hand at Close of Reporting Period (from Line 27).....	10017.39	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	4085.33	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Debbie Bacigalupi for Congress**

Report Covering the Period: From:  /  /  To:  /  /

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	8650.00	16499.97
(ii) Unitemized.....	4154.00	5586.00
(iii) TOTAL of contributions from individuals ▶	12804.00	22085.97
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	12804.00	22085.97
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	0.00	45.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	12804.00	22130.97

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	5481.10	12113.58
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	5481.10	12113.58

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	2694.49
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	12804.00
25. SUBTOTAL (add Line 23 and Line 24).....	15498.49
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	5481.10
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	10017.39

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 22
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Debbie Bacigalupi for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**John Oehlert**

Mailing Address 1198 Main St.

City State Zip Code  
Montara CA 94037

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Frisolutions, Inc. Statistician

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1025.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 10 / 2012

**Transaction ID : INCA85**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Thomas Weissmiller**

Mailing Address 11 W Bellevue Ave

City State Zip Code  
San Mateo CA 94402

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Immigration & Customs Enforcement Accountant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 10 / 2012

**Transaction ID : INCA84**

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
**Leslie Tozzini**

Mailing Address 114 Myrtle St.

City State Zip Code  
Redwood City CA 94062

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Thesaurus Information and Strategies, Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 16 / 2012

**Transaction ID : INCA87**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

900.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 22
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Debbie Bacigalupi for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**John Oehlert**

Mailing Address 1198 Main St.

City State Zip Code  
Montara CA 94037

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Frisolutions, Inc. Statistician

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1025.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 17 / 2012

**Transaction ID : INCA100**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Charles Munger Jr.**

Mailing Address 1423 Hamilton Avenue

City State Zip Code  
Palo Alto CA 94301

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
None Physicist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2740.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 24 / 2012

**Transaction ID : INCA91**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Ian Patrick Sobieski**

Mailing Address 17 Bulkeley Unit #1

City State Zip Code  
Sausalito CA 94965

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Band of Angels, LLC Managing Director

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
200.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 24 / 2012

**Transaction ID : INCA92**

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1700.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 22
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Debbie Bacigalupi for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Heather Osterloh Gass**

Mailing Address 341 Castle Crest Road

City Alamo State CA Zip Code 94507-2677

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed (Same Name) Occupation Realtor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 29 / 2012

**Transaction ID : INCA97**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Joanne Shaw**

Mailing Address 16 Escuela Rd.

City La Selva Beach State CA Zip Code 95076

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 29 / 2012

**Transaction ID : INCA98**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Beatrice E. Gunn Phillips**

Mailing Address 456 Almanor Ave.

City South San Francisc State CA Zip Code 94080

FEC ID number of contributing federal political committee. **C**

Name of Employer HG Associations Personal Care Managers Occupation Registered Nurse

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 05 / 2012

**Transaction ID : INCA116**

Amount of Each Receipt this Period  
**100.00**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**450.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 22
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Debbie Bacigalupi for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Margaret Stephan**

Mailing Address 505 Cypress Point Dr.  
Unit 170

City Mountain View State CA Zip Code 94043-4843

FEC ID number of contributing federal political committee. **C**

Name of Employer Kilpatrick Townsend Occupation Legal Assistant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 07 / 2012

**Transaction ID : INCA122**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Richard F. Marshall**

Mailing Address 1141 Chestnut St.  
#2

City San Francisco State CA Zip Code 94109

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed (Same Name) Occupation Rancher

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 13 / 2012

**Transaction ID : INCA117**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Donald A. Best**

Mailing Address PO Box 34683

City Los Angeles State CA Zip Code 90034

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed (Same Name) Occupation Real Estate

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 20 / 2012

**Transaction ID : INCA206**

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

800.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 22
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Debbie Bacigalupi for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Emerson Glazer**

Mailing Address 9440 Santa Monica Blvd  
#705

City State Zip Code  
Beverly Hills CA 90210

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Emerik Properties Real Estate

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 20 / 2012

**Transaction ID : INCA105**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Beatrice E. Gunn Phillips**

Mailing Address 456 Almanor Ave.

City State Zip Code  
South San Francisc CA 94080

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
HG Associations Personal Care Managers Registered Nurse

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
200.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 22 / 2012

**Transaction ID : INCA200**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Kristen Riter**

Mailing Address 1836 Fallbrook Drive

City State Zip Code  
Alamo CA 94507

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Employed (Same Name) Quality Auditor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 24 / 2012

**Transaction ID : INCA128**

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2100.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 22
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Debbie Bacigalupi for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Judy L. Tyler**

Mailing Address 1215 Murchison Drive

City Millbrae State CA Zip Code 94030

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed (Same Name) Occupation Marriage and Family Therapist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 31 / 2012

**Transaction ID : INCA161**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Heather Osterloh Gass**

Mailing Address 341 Castle Crest Road

City Alamo State CA Zip Code 94507-2677

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed (Same Name) Occupation Realtor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 01 / 2012

**Transaction ID : INCA208**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**P. Gregory Conlon**

Mailing Address 43 Virginia Ln.

City Atherton State CA Zip Code 94027

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed (Same Name) Occupation Business Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 04 / 2012

**Transaction ID : INCA166**

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

550.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 22  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Debbie Bacigalupi for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Michael Cunneen**

Mailing Address 2732 Waltham Cross

City Belmont State CA Zip Code 94002

FEC ID number of contributing federal political committee. **C**

Name of Employer Signet Products Inc. Occupation Small Business Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 05 / 2012

**Transaction ID : INCA165**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Sole Terra Farming**

Mailing Address 3986 Morehead Avenue

City Chico State CA Zip Code 95927

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 05 / 2012

**Transaction ID : INCA211**

Amount of Each Receipt this Period  
400.00

**C.** Full Name (Last, First, Middle Initial)  
**Rick Ciquini**

Mailing Address 3986 Morehead Avenue

City Chico State CA Zip Code 95927

FEC ID number of contributing federal political committee. **C**

Name of Employer Sole Terra Farming - Cinquini Farms Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 05 / 2012

**Transaction ID : IDTA2**

Amount of Each Receipt this Period  
400.00

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

650.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : INCA211

Contribution assigned to: Rick Ciquini

Form/Schedule:

Transaction ID:

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 22
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Debbie Bacigalupi for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Leslie Tozzini**

Mailing Address 114 Myrtle St.

City State Zip Code  
Redwood City CA 94062

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Thesaurus Information and Strategies, Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**600.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**09 / 06 / 2012**

**Transaction ID : INCA179**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**Carolyn Whitaker**

Mailing Address 16100 Ridgecrest Avenue

City State Zip Code  
Monte Sereno CA 95030

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
None Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**09 / 06 / 2012**

**Transaction ID : INCA187**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Fred Yeager**

Mailing Address 200 Occidental Ave

City State Zip Code  
Burlingame CA 94010

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
UBS Financial Financial Advisor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**09 / 26 / 2012**

**Transaction ID : INCA288**

Amount of Each Receipt this Period  
**500.00**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1500.00**

**8650.00**

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 22			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Debbie Bacigalupi for Congress**

Full Name (Last, First, Middle Initial) <b>A. Best Merchant Bankcard</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2012
Mailing Address 3 Western MD Pkwy.		Amount of Each Disbursement this Period 10.00
City Hagerstown	State MD	
Zip Code 21740	Purpose of Disbursement Merchant Services Fee	<b>Transaction ID : EXPB72</b>
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Best Merchant Bankcard</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2012
Mailing Address 3 Western MD Pkwy.		Amount of Each Disbursement this Period 32.82
City Hagerstown	State MD	
Zip Code 21740	Purpose of Disbursement Merchant Services Fee	<b>Transaction ID : EXPB73</b>
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Best Merchant Bankcard</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2012
Mailing Address 3 Western MD Pkwy.		Amount of Each Disbursement this Period 10.00
City Hagerstown	State MD	
Zip Code 21740	Purpose of Disbursement Merchant Services Fee	<b>Transaction ID : EXPB253</b>
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	52.82
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 15 OF 22	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Debbie Bacigalupi for Congress**

Full Name (Last, First, Middle Initial) <b>A. Best Merchant Bankcard</b>		Date of Disbursement MM / DD / YYYY 08 / 03 / 2012
Mailing Address 3 Western MD Pkwy.		Amount of Each Disbursement this Period 419.39 <b>Transaction ID : EXPB254</b>
City Hagerstown	State MD	
Zip Code 21740	Purpose of Disbursement Merchant Services Fee	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Glenn W. Gelineau</b>		Date of Disbursement MM / DD / YYYY 08 / 23 / 2012
Mailing Address 9 Vine St.		Amount of Each Disbursement this Period 375.38 <b>Transaction ID : EXPB126</b>
City San Carlos	State CA	
Zip Code 94070	Purpose of Disbursement Travel expenses for candidate	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>C. Best Merchant Bankcard</b>		Date of Disbursement MM / DD / YYYY 09 / 04 / 2012
Mailing Address 3 Western MD Pkwy.		Amount of Each Disbursement this Period 10.00 <b>Transaction ID : EXPB255</b>
City Hagerstown	State MD	
Zip Code 21740	Purpose of Disbursement Merchant Services Fee	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	419.39
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 22			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Debbie Bacigalupi for Congress**

Full Name (Last, First, Middle Initial) <b>A. Best Merchant Bankcard</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2012
Mailing Address 3 Western MD Pkwy.		Amount of Each Disbursement this Period 178.65
City Hagerstown	State MD	
Zip Code 21740	Purpose of Disbursement Merchant Services Fee	<b>Transaction ID : EXPB256</b>
Candidate Name	Category/ Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Christopher L. Bowman</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2012
Mailing Address 98 Parkridge Dr. #103		Amount of Each Disbursement this Period 288.55
City San Francisco	State CA	
Zip Code 94131	Purpose of Disbursement District maps & precinct list	<b>Transaction ID : EXPB274</b>
Candidate Name	Category/ Type 006	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Warren and Associates LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2012
Mailing Address 20 Galli Drive Suite A		Amount of Each Disbursement this Period 566.03
City Novato	State CA	
Zip Code 94949-5731	Purpose of Disbursement Political compliance and treasurer services	<b>Transaction ID : EXPB270</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1033.23
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 22			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Debbie Bacigalupi for Congress**

Full Name (Last, First, Middle Initial) <b>A. Warren and Associates LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2012
Mailing Address 20 Galli Drive Suite A		Amount of Each Disbursement this Period 379.02 <b>Transaction ID : EXPB266</b>
City Novato State CA Zip Code 94949-5731	Purpose of Disbursement Political compliance and treasurer services 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Warren and Associates LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2012
Mailing Address 20 Galli Drive Suite A		Amount of Each Disbursement this Period 854.84 <b>Transaction ID : EXPB262</b>
City Novato State CA Zip Code 94949-5731	Purpose of Disbursement Political compliance & treasurer services 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Warren and Associates LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2012
Mailing Address 20 Galli Drive Suite A		Amount of Each Disbursement this Period 482.22 <b>Transaction ID : EXPB264</b>
City Novato State CA Zip Code 94949-5731	Purpose of Disbursement Political compliance and treasurer services 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1716.08
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 22			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Debbie Bacigalupi for Congress**

Full Name (Last, First, Middle Initial) <b>A. Warren and Associates LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2012
Mailing Address 20 Galli Drive Suite A		Amount of Each Disbursement this Period 1094.72 <b>Transaction ID : EXPB272</b>
City Novato State CA Zip Code 94949-5731	Purpose of Disbursement Political compliance & treasurer services 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Warren and Associates LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2012
Mailing Address 20 Galli Drive Suite A		Amount of Each Disbursement this Period 391.58 <b>Transaction ID : EXPB268</b>
City Novato State CA Zip Code 94949-5731	Purpose of Disbursement Political compliance & treasurer services 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Phoenix Digital Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2012
Mailing Address 517 A 9th Ave		Amount of Each Disbursement this Period 662.00 <b>Transaction ID : EXPB277</b>
City San Mateo State CA Zip Code 94402	Purpose of Disbursement Campaign paraphernalia 006 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2148.30
<b>TOTAL</b> This Period (last page this line number only).....	5369.82

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 19 OF 22
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

**Debbie Bacigalupi for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>American Express</b>	Nature of Debt (Purpose): Permits & tabling
Mailing Address 2965 West Corporate Lakes Blvd	
City State Zip Code Weston FL 33331-3626	

Outstanding Balance Beginning This Period 320.00	<b>Transaction ID : PAYD83</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 320.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>American Express</b>	Nature of Debt (Purpose): Campaign Materials, Travel Expenses, Advertising Expenses
Mailing Address 2965 West Corporate Lakes Blvd	
City State Zip Code Weston FL 33331-3626	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : PAYD291</b>	
Amount Incurred This Period 963.72	Payment This Period 0.00	Outstanding Balance at Close of This Period 963.72

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>American Express</b>	Nature of Debt (Purpose): Printing Expense, Travel Expense, Office Expense
Mailing Address 2965 West Corporate Lakes Blvd	
City State Zip Code Weston FL 33331-3626	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : PAYD292</b>	
Amount Incurred This Period 1009.27	Payment This Period 0.00	Outstanding Balance at Close of This Period 1009.27

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	2292.99
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)

**Debbie Bacigalupi for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Best Merchant Bankcard</b>		Nature of Debt (Purpose): Merchant Services Fee
Mailing Address 3 Western MD Pkwy.		
City	State	Zip Code
Hagerstown	MD	21740

Outstanding Balance Beginning This Period	<b>Transaction ID : PAYD290</b>	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="42.84"/>	<input type="text" value="0.00"/>	<input type="text" value="42.84"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Signs Now</b>		Nature of Debt (Purpose): Signs
Mailing Address 1128 Sibley St. Unit B		
City	State	Zip Code
Folsom	CA	95630

Outstanding Balance Beginning This Period	<b>Transaction ID : PAYD293</b>	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="862.00"/>	<input type="text" value="0.00"/>	<input type="text" value="862.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Warren and Associates LLC</b>		Nature of Debt (Purpose): Political compliance & treasurer services
Mailing Address 20 Galli Drive Suite A		
City	State	Zip Code
Novato	CA	94949-5731

Outstanding Balance Beginning This Period	<b>Transaction ID : PAYD46</b>	
<input type="text" value="1094.72"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="1094.72"/>	<input type="text" value="0.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="904.84"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)

**Debbie Bacigalupi for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Warren and Associates LLC**

Mailing Address 20 Galli Drive  
 Suite A

City State Zip Code  
 Novato CA 94949-5731

Nature of Debt (Purpose):  
 Political compliance & treasurer services

Outstanding Balance Beginning This Period 391.58	<b>Transaction ID : PAYD48</b>	
Amount Incurred This Period 0.00	Payment This Period 391.58	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Warren and Associates LLC**

Mailing Address 20 Galli Drive  
 Suite A

City State Zip Code  
 Novato CA 94949-5731

Nature of Debt (Purpose):  
 Political compliance and treasurer services

Outstanding Balance Beginning This Period 566.03	<b>Transaction ID : PAYD80</b>	
Amount Incurred This Period 0.00	Payment This Period 566.03	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Warren and Associates LLC**

Mailing Address 20 Galli Drive  
 Suite A

City State Zip Code  
 Novato CA 94949-5731

Nature of Debt (Purpose):  
 Political compliance and treasurer services

Outstanding Balance Beginning This Period 379.02	<b>Transaction ID : PAYD81</b>	
Amount Incurred This Period 0.00	Payment This Period 379.02	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	0.00
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)

**Debbie Bacigalupi for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Warren and Associates LLC</b>		Nature of Debt (Purpose): Political compliance & treasurer services
Mailing Address 20 Galli Drive Suite A		
City State	Zip Code	
Novato CA	94949-5731	

Outstanding Balance Beginning This Period	Transaction ID : <b>PAYD261</b>	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="487.50"/>	<input type="text" value="0.00"/>	<input type="text" value="487.50"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>William McLane Video Editing</b>		Nature of Debt (Purpose): Video Editing
Mailing Address 1101 Woodside Rd. #6		
City State	Zip Code	
Redwood City CA	94061	

Outstanding Balance Beginning This Period	Transaction ID : <b>PAYD294</b>	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="400.00"/>	<input type="text" value="0.00"/>	<input type="text" value="400.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State	Zip Code

Outstanding Balance Beginning This Period		
<input type="text"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text"/>	<input type="text"/>	<input type="text"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="887.50"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text" value="4085.33"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="4085.33"/>